

## Centers for Medicare & Medicaid Services, HHS

## § 440.2

- 440.2 Specific definitions; definitions of services for FFP purposes.
- 440.10 Inpatient hospital services, other than services in an institution for mental diseases.
- 440.20 Outpatient hospital services and rural health clinic services.
- 440.30 Other laboratory and X-ray services.
- 440.40 Nursing facility services for individuals age 21 or older (other than services in an institution for mental disease), EPSDT, and family planning services and supplies.
- 440.50 Physicians' services and medical and surgical services of a dentist.
- 440.60 Medical or other remedial care provided by licensed practitioners.
- 440.70 Home health services.
- 440.80 Private duty nursing services.
- 440.90 Clinic services.
- 440.100 Dental services.
- 440.110 Physical therapy, occupational therapy, and services for individuals with speech, hearing, and language disorders.
- 440.120 Prescribed drugs, dentures, prosthetic devices, and eyeglasses.
- 440.130 Diagnostic, screening, preventive, and rehabilitative services.
- 440.140 Inpatient hospital services, nursing facility services, and intermediate care facility services for individuals age 65 or older in institutions for mental diseases.
- 440.150 Intermediate care facility (ICF/MR) services.
- 440.155 Nursing facility services, other than in institutions for mental diseases.
- 440.160 Inpatient psychiatric services for individuals under age 21.
- 440.165 Nurse-midwife services.
- 440.166 Nurse practitioner services.
- 440.167 Personal care services.
- 440.168 Primary care case management services.
- 440.170 Any other medical or remedial care recognized under State law and specified by the Secretary.
- 440.180 Home or community-based services.
- 440.181 Home and community-based services for individuals age 65 or older.
- 440.185 Respiratory care for ventilator-dependent individuals.

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AUTHORITY: Sec. 1102 of the Social Security Act (42 U.S.C. 1302).

SOURCE: 43 FR 45224, Sept. 29, 1978, unless otherwise noted.

## Subpart A—Definitions

### § 440.1 Basis and purpose.

This subpart interprets and implements the following sections of the Act:

1905(a) Services included in the term “medical assistance.”

1905 (c), (d), (f) through (i), (l), and (m) Definitions of institutions and services that are included in the term “medical assistance.”

1913 “Swing-bed” services. (See §§ 447.280 and 482.66 of this chapter for related provisions on “swing-bed” services.)

1915(c) Home and community-based services listed as “medical assistance” and furnished under waivers under that section to individuals who would otherwise require the level of care furnished in a hospital, NF, or ICF/MR.

1915(d) Home and community-based services listed as “medical assistance” and furnished under waivers under that section to individuals age 65 or older who would otherwise require the level of care furnished in a NF.

[57 FR 29155, June 30, 1992, as amended at 61 FR 38398, July 24, 1996]

### § 440.2 Specific definitions; definitions of services for FFP purposes.

#### (a) *Specific definitions.*

*Inpatient* means a patient who has been admitted to a medical institution as an inpatient on recommendation of a physician or dentist and who—

(1) Receives room, board and professional services in the institution for a 24 hour period or longer, or

(2) Is expected by the institution to receive room, board and professional services in the institution for a 24 hour period or longer even though it later develops that the patient dies, is discharged or is transferred to another facility and does not actually stay in the institution for 24 hours.

*Outpatient* means a patient of an organized medical facility, or distinct part of that facility who is expected by